

General Assembly

Bill No. 1055

January Session, 2005

LCO No. 3386

03386_____

Referred to Committee on Public Health

Introduced by:

SEN. DELUCA, 32nd Dist.

REP. WARD, 86th Dist.

AN ACT CONCERNING THE COMMUNITY MENTAL HEALTH STRATEGY BOARD AND THE CONNECTICUT VALLEY HOSPITAL AND CEDARCREST REGIONAL HOSPITAL MERGER.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- Section 1. Section 17a-485a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2005*):
- 3 (a) Expenditures from the Community Mental Health Strategic 4 Investment Fund established under section 17a-485 [shall] may be
- 4 Investment Fund established under section 17a-485 [shall] <u>may</u> be 5 made in accordance with a community mental health strategic plan
- 6 and financial assistance plan adopted by the Community Mental
- 7 Health Strategy Board established under section 17a-485b on or before
- 8 January 1, 2002, and annually thereafter. Such strategic plan shall be
- 9 consistent with other applicable state plans for mental health services.
- 10 (b) The Commissioners of Mental Health and Addiction Services,
- 11 Children and Families, Economic and Community Development,
- 12 Education, Correction, Public Health and Social Services, the Secretary
- 13 of the Office of Policy and Management and the Chief Court

- Administrator [shall] may provide such information, including, but 14
- 15 not limited to, information regarding needs assessments, program
- 16 reviews and program revenues and expenses, and make such
- 17 recommendations for expenditures from the account established under
- 18 section 17a-485, as may be requested by the board.
- 19 Sec. 2. Section 17a-485b of the general statutes is repealed and the
- 20 following is substituted in lieu thereof (*Effective July 1, 2005*):
- (a) There is established a Community Mental Health Strategy Board 22 which shall be advisory to the Commissioner of Mental Health and 23 Addiction Services. The voting members of the board shall be
- 24 appointed as follows: (1) Two members by the Governor; (2) two
- 25 members by the president pro tempore of the Senate; (3) two members
- 26 by the speaker of the House of Representatives; (4) one member by the
- 27 majority leader of the Senate; (5) one member by the majority leader of
- 28 the House of Representatives; (6) two members by the minority leader
- 29 of the Senate; (7) two members by the minority leader of the House of
- 30 Representatives; (8) the Commissioner of Children and Families; and
- 31 (9) the Commissioner of Mental Health and Addiction Services, who
- 32 shall serve as chairperson. The Secretary of the Office of Policy and
- 33 Management, the Chief Court Administrator and the Commissioners
- 34 of Economic and Community Development, Education, Correction,
- 35 Public Health and Social Services, or their designees, shall serve as
- 36 nonvoting ex-officio members of the board. Board members shall serve
- 37 without compensation but shall be reimbursed for their necessary
- 38 expenses. All initial appointments to the board shall be made not later
- 39 than September 1, 2001. The Commissioner of Mental Health and
- 40 Addiction Services shall convene the first meeting of the board not
- 41 later than September 15, 2001.
- 42 (b) The board, by majority vote of the voting members, [shall] may,
- 43 not less than annually, [approve] advise the Commissioner of Mental
- 44 Health and Addiction Services concerning commitments and
- 45 disbursements that [the Commissioner of Mental Health and

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46 Addiction Services] said commissioner may make from the 47 Community Mental Health Strategic Investment Fund established 48 under section 17a-485 for the purposes of sections 17a-485 to 17a-485c, 49 inclusive, and section 4 of public act 01-8 of the June special session*. 50 Ithat are consistent with the community mental health strategic plan 51 adopted under subsection (a) of section 17a-485a. The board may (1) 52 designate the appropriate state agencies or the Connecticut Housing 53 Finance Authority to receive such disbursements and to implement the 54 provisions of sections 17a-485 to 17a-485c, inclusive, and section 4 of 55 public act 01-8 of the June special session*, or (2) in conjunction with 56 one or more state agencies or the Connecticut Housing Finance 57 Authority, issue requests for proposals and request the Commissioner 58 of Mental Health and Addiction Services to enter into contracts to 59 make disbursements and implement the provisions of sections 17a-485 60 to 17a-485c, inclusive, and section 4 of public act 01-8 of the June 61 special session*. The board shall designate the assignment of funds not 62 otherwise assigned to the subaccounts established under section 17a-63 485 as the board deems appropriate.]

- (c) The [board] <u>Commissioner of Mental Health and Addiction Services</u> shall, not later than February 1, 2002, and annually thereafter, report to the Governor and the General Assembly, in accordance with the provisions of section 11-4a. The report shall include a description of all disbursements made from the account established under section 17a-485 during the prior fiscal year and an evaluation of the impact of each program or service receiving such disbursements with respect to its outcome and effectiveness in expanding access to quality, appropriate community-based mental health care.
- (d) Within the limits of available appropriations, the Department of Mental Health and Addiction Services [shall] <u>may</u> provide for such staff and other administrative support as may be required by the board for the purposes of sections 17a-485 to 17a-485c, inclusive, subsection (h) of section 8-395, subsection (c) of section 54-56g, subsection (g) of section 54-56i, section 54-56k and sections 4, 7, 11 and 12 of public act

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- 79 01-8 of the June special session*.
- Sec. 3. Subsection (c) of section 17a-485d of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July* 1, 2005):
- 83 (c) The Commissioner of Social Services shall take such action as 84 may be necessary to amend the Medicaid state plan to provide for 85 coverage of optional adult rehabilitation services supplied by 86 providers of mental health services or substance abuse rehabilitation 87 services for adults with serious and persistent mental illness or who 88 have alcoholism or other substance abuse conditions, that are certified 89 by the Department of Mental Health and Addiction Services. [For the 90 fiscal years ending June 30, 2004, and June 30, 2005, up to three million 91 dollars in each such fiscal year of any moneys received by the state as 92 federal reimbursement for optional Medicaid adult rehabilitation 93 services shall be credited to the Community Mental Health Restoration 94 subaccount within the account established under section 17a-485 and 95 shall be available for use for the purposes of the subaccount.] The 96 Commissioner of Social Services shall adopt regulations, in accordance 97 with the provisions of chapter 54, to implement optional rehabilitation 98 services under the Medicaid program. The commissioner shall 99 implement policies and procedures to administer such services while 100 in the process of adopting such policies or procedures in regulation 101 form, provided notice of intention to adopt the regulations is printed 102 Connecticut Law Journal within forty-five 103 implementation, and any such policies or procedures shall be valid 104 until the time final regulations are effective.
- Sec. 4. Subsection (b) of section 17a-450 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July* 1, 2005):
- 108 (b) For the purposes of chapter 50, the Department of Mental Health 109 and Addiction Services [shall be a single budgeted agency. It shall 110 consist of two divisions, the Division of Mental Health Services and the

111 Division of Substance Abuse Services, that shall be organized to 112 promote comprehensive, client-based services in the areas of mental 113 health treatment and substance abuse treatment and to ensure the 114 programmatic integrity and clinical identity of services in each area. 115 The department shall perform the functions of: Centralized 116 administration, planning and program development; prevention and 117 treatment programs and facilities, both inpatient and outpatient, for 118 persons with psychiatric disabilities or persons with substance abuse 119 disabilities, or both; community mental health centers and community 120 or regional programs and facilities providing services for persons with 121 psychiatric disabilities or persons with substance abuse disabilities, or 122 both; training and education; and research and evaluation of programs 123 and facilities providing services for persons with psychiatric 124 disabilities or persons with substance abuse disabilities, or both. The 125 department shall include, but not be limited to, the following divisions 126 and facilities or their successor facilities: The office of the 127 Commissioner of Mental Health and Addiction Services; Capitol 128 Region Mental Health Center; Connecticut Valley Hospital, including 129 the Acute Care Division of Connecticut Valley Hospital; the 130 Connecticut Mental Health Center; the Whiting Forensic Division; 131 Ribicoff Research Center; [Cedarcrest Hospital;] the Southwest 132 Connecticut Mental Health System, including the Franklin S. DuBois 133 Center and the Greater Bridgeport Community Mental Health Center; 134 the Southeastern Mental Health Authority; River Valley Services; the 135 Western Connecticut Mental Health Network; and any other 136 state-operated facility for the treatment of persons with psychiatric 137 disabilities or persons with substance abuse disabilities, or both, but 138 shall not include those portions of such facilities transferred to the 139 Department of Children and Families for the purpose of consolidation of children's services. 140

Sec. 5. Subsection (c) of section 17a-458 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July* 1, 2005): 144 (c) "State-operated facilities" means those hospitals or other facilities 145 providing treatment for persons with psychiatric disabilities or for 146 persons with substance abuse disabilities, or both, which are operated 147 in whole or in part by the Department of Mental Health and Addiction Services. Such facilities include, but are not limited to, Capitol Region 148 149 Mental Health Center, Connecticut Valley Hospital, including the 150 Acute Care Division of Connecticut Valley Hospital, Norwich 151 Hospital, Fairfield Hills Hospital, the Connecticut Mental Health 152 Center, the Franklin S. DuBois Center, [Cedarcrest Regional Hospital,] 153 the Greater Bridgeport Community Mental Health Center [, Blue Hills 154 Hospital, Berkshire Woods Treatment Center, Eugene Boneski 155 Treatment Center,] and Dutcher Treatment Center. [, but shall not 156 include those portions of such facilities transferred to the Department 157 of Children and Families for the purpose of consolidation of children's 158 services.]

Sec. 6. (NEW) (*Effective July 1, 2005*) If the term "Acute Care Division" is used or referred to in any public or special act of 2005 or 2006 or in any section of the general statutes that is amended in 2005 or 2006, it shall be deemed to mean or refer to the Acute Care Division of Connecticut Valley Hospital.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2005	17a-485a
Sec. 2	July 1, 2005	17a-485b
Sec. 3	July 1, 2005	17a-485d(c)
Sec. 4	July 1, 2005	17a-450(b)
Sec. 5	July 1, 2005	17a-458(c)
Sec. 6	July 1, 2005	New section

Statement of Purpose:

To implement the Governor's budget recommendations.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]